ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | S2 | | 9/28.01 |
| O.I.P.E. CLASSIFIER | | | 10/2/2 |
| FORMALITY REVIEW | FR | OR | 10-02-01 |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

## INDEX OF CLAIMS

✔ ............................... Rejected
= ............................... Allowed
— (Through numeral)... Canceled
÷ ............................... Restricted

N ............................... Non-elected
I ............................... Interference
A ............................... Appeal
O ............................... Objected

| Claim Final | Original | Date |  |  |  |  |  |  |
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If more than 150 claims or 10 actions
staple additional sheet here